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TRANSMITTAL FORM		Application Number	Application Number 19/668,049			
		Filing Date	9/22/200	\$422/2003 THEEL, Julie		
		First Named Inventor	THEEL.			
		Art Unit	3711			
(to be used for all correspondence after initial fläng)		Examiner Name	HYLINS	HYLINSKI, Alyesa Marie		
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	SIGNATURE	OF APPLICANT, ATT	ORNEY,	OR AG	ENT	
Firm Name Newhope Law, F	PC .					
Signature ////	<u> </u>					
Printed name Clement Cheng						
Date 8-28-2009		Reg. No.	No. 45463			
I hereby certify that this correspond sufficient postage as first class mail the date shown below:	ence is being fac	ICATE OF TRANSMIS: simile transmitted to the USP dddressed to: Commissioner I	TO or deno	sited with	the Ur 1450, a	illed States Postal Service with Alexandria, VA 22313-1450 on
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Telephone 714-625-9555

Date 8-28-2009

Approved for use through 96/30/2015, OMB 0551-5000 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Index the Paperwink Reduction Act of 1999, no persons are required to respond to a collection of information unless it displays a valid CMS control number Effective on 12/09/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 IH.R. 48189 Application Number 10/668049 **FEE TRANSMITTAL** Filing Date 9/22/2003 For FY 2009 First Named Inventor THEEL, Julie Examiner Name Applicant claims small entity status. See 37 CFR 1.27 HYLINSKI, Alvssa Marie Art Unit 3711 TOTAL AMOUNT OF PAYMENT (S) 270.00 Attorney Docket No. Theel PerToy METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please mentify): Deposit Account Deposit Account Number: Deposit Account Name: For the above identified deposit account, the Director is hereby authorized to: (check at that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1 16 and 1,17 Credit any overpayments WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity Small Entity Application Type Fee (S) Fee (S) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Utility 330 165 540 220 270 110 Design 220 110 100 50 140 70 Plunt 220 116 330 165 170 85 Reissun 330 165 540 270 650 325 Provisional. 110 6 0 6 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (S) Each claim over 20 (including Reissues) 57 liach independent claim over 3 (including Reissues) 220 Multiple dependent claims 390 195 Total Claims Extra Claims Fee (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP v highest number of total claims paid for, if greater than 20, Indep. Claims Extra Claims Fee (3) Fee Paid (\$) · 3 or HP # HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Total Sheets Extra Shoots Fee Paid (\$) (round up to a whole number) x 4. OTHER FEF(S) Fees Paid (\$) Non-English Specification. \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Appeal Brief Hing has 270.00 SURMITTED BY Registration No. 45463 Skinature

Name (Print/Type) Clement Chenn

(Attorney/Agent)

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